
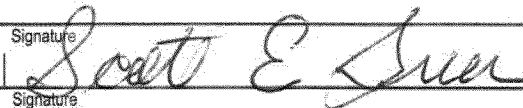
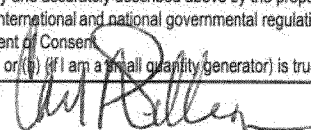
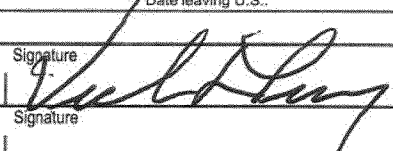


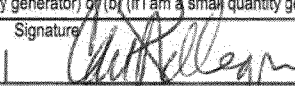

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NYN 000 206 699	2. Page 1 of 1	3. Emergency Response Phone (908) 420-1707	4. Manifest Tracking Number 016689014 JJK	
5. Generator's Name and Mailing Address US EPA REGION 2-NIAGARA FALLS B 2890 WOODBRIDGE AVENUE EDISON, NJ 08837			Generator's Site Address (if different than mailing address) 9450 NIAGARA FALLS BLVD NIAGARA FALLS, NY 14304			
Generator's Phone: (908) 420-1707						
6. Transporter 1 Company Name US Bulk Transport Inc.			U.S. EPA ID Number PAD987347515			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. SITE #2 LANDFI 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633			
Facility's Phone: (800) 592-5489						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
			No.	Type		
		Non DOT Regulated Material	01	DT	BT 23	T
						13. Waste Codes NORM
14. Special Handling Instructions and Additional Information L163014WDI / Non RCRA-Non DOT Regulated Material (Debris)- Approved for the Office Area Area 5 medium concentration pile						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name CARL PELLEGRINO		Signature 		Month Day Year 12 20 16		
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____					
	17. Transporter Acknowledgment of Receipt of Materials					
TRANSPORTER	Transporter 1 Printed/Typed Name SCOTT E GREEN		Signature 		Month Day Year 12 20 16	
	Transporter 2 Printed/Typed Name		Signature		Month Day Year	
DESIGNATED FACILITY	18. Discrepancy					
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	Manifest Reference Number: _____					
	18b. Alternate Facility (or Generator) U.S. EPA ID Number					
	Facility's Phone: _____					
	18c. Signature of Alternate Facility (or Generator)					Month Day Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1. NONE	2.	3.	4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NYN 000 206 699	2. Page 1 of 1	3. Emergency Response Phone (908) 420-1707	4. Manifest Tracking Number 016689015 JJK		
5. Generator's Name and Mailing Address US EPA REGION 2-NIAGARA FALLS 2890 WOODBRIDGE AVENUE EDISON, NJ 08837			6. Generator's Site Address (if different than mailing address) 9450 NIAGARA FALLS BLVD NIAGARA FALLS, NY 14304				
Generator's Phone: (908) 420-1707							
6. Transporter 1 Company Name us Bulk Transport Inc.			U.S. EPA ID Number PAD 987347515				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. SITE #2 LANDFI 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633				
Facility's Phone: (800) 592-5489							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
		Non DOT Regulated Material	01	DT	EST 22	T	NORM
14. Special Handling Instructions and Additional Information 1. L163014WDI / Non RCRA-Non DOT Regulated Material (Debris)- Approved for the Office Area Area 5 medium concentration pile							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Carl Pellegrino		Signature 		Month 12		Day 20	
				Year 16			
TRANSPORTER INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Victor N. Taky		Signature 		Month 12		Day 20
				Year 16			
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: _____						
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number		
	Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator)						Month	Day
						Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. NONE		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name				Signature		Month	
						Day	
						Year	


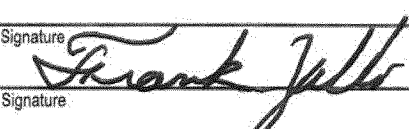
UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NYN 000 206 699		2. Page 1 of 1		3. Emergency Response Phone (908) 420-1707		4. Manifest Tracking Number 016689016 JJK		
		5. Generator's Name and Mailing Address US EPA REGION 2-NIAGARA FALLS B 2890 WOODBRIDGE AVENUE EDISON, NJ 08837		Generator's Site Address (if different than mailing address) 9450 NIAGARA FALLS BLVD NIAGARA FALLS, NY 14304		Generator's Phone: (908) 420-1707				
6. Transporter 1 Company Name US Bulk Transport Inc.		7. Transporter 2 Company Name		U.S. EPA ID Number PAD 987347515		U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. SITE #2 LANDFI 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111		Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 633						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) Non DOT Regulated Material				10. Containers No. Type 01 DT		11. Total Quantity Est 22	12. Unit Wt./Vol. T	13. Waste Codes NORM
	2.									
	3.									
	4.									
14. Special Handling Instructions and Additional Information 1. L163014WDI / Non RCRA-Non DOT Regulated Material (Debris)- Approved for the Office Area Area 5 medium concentration pile										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name CARL PELLEGRINO										
Signature <i>[Signature]</i>										
Month Day Year 12 20 16										
TRANSPORTER INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name JAN L FANZOSY										
Signature <i>[Signature]</i>										
Month Day Year 12 20 16										
Transporter 2 Printed/Typed Name										
Signature										
Month Day Year										
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number: _____									
	18b. Alternate Facility (or Generator) U.S. EPA ID Number									
	Facility's Phone: _____									
18c. Signature of Alternate Facility (or Generator)										
Month Day Year										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. NONE 2. 3. 4.										
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name										
Signature										
Month Day Year										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NYN 000 206 699	2. Page 1 of 1	3. Emergency Response Phone (908) 420-1707	4. Manifest Tracking Number 016689017 JJK		
5. Generator's Name and Mailing Address US EPA REGION 2-NIAGARA FALLS 2890 WOODBRIDGE AVENUE EDISON, NJ 08837			6. Generator's Site Address (if different than mailing address) 9450 NIAGARA FALLS BLVD NIAGARA FALLS, NY 14304				
Generator's Phone: (908) 420-1707							
6. Transporter 1 Company Name US Bulk Transport Inc.			U.S. EPA ID Number PAD 987347515				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. SITE #2 LANDFI 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633				
Facility's Phone: (800) 592-5489							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) Non DOT Regulated Material	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
			01	DT	Est 23	T	NORM
14. Special Handling Instructions and Additional Information 1. L163014WDI / Non RCRA-Non DOT Regulated Material (Debris)- Approved for the Office Area Area 5 medium concentration pile							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name CARL PELLEGRINO		Signature <i>Carl Pellegrino</i>		Month Day Year 12 20 16			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Michael P. Roff		Signature <i>Michael P. Roff</i>		Month Day Year 12 20 16			
Transporter 2 Printed/Typed Name		Signature		Month Day Year			
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number: _____							
18b. Alternate Facility (or Generator)				U.S. EPA ID Number			
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator)						Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. NONE		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month Day Year			

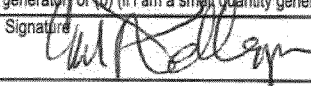

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NYN 000 206 699	2. Page 1 of 1	3. Emergency Response Phone (908) 420-1707	4. Manifest Tracking Number 016689018 JJK		
5. Generator's Name and Mailing Address US EPA REGION 2-NIAGARA FALLS B 2890 WOODBRIDGE AVENUE EDISON, NJ 08837			Generator's Site Address (if different than mailing address) 9450 NIAGARA FALLS BLVD NIAGARA FALLS, NY 14304				
Generator's Phone: (908) 420-1707							
6. Transporter 1 Company Name US Bulk Transport Inc.			U.S. EPA ID Number PAD987347515				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. SITE #2 LANDFI 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633				
Facility's Phone: (800) 592-5489							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
		Non DOT Regulated Material	01	DT	Est 23	T	NORM
		2.					
		3.					
	4.						
14. Special Handling Instructions and Additional Information L163014WDI / Non RCRA-Non DOT Regulated Material (Debris)- Approved for the Office Area Area 5 medium concentration pile							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name APR KELLER Signature <i>[Signature]</i> Month 12 Day 20 Year 16							
INTL	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
	Transporter signature (for exports only): _____						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name William J. Sathoff Signature <i>[Signature]</i> Month 12 Day 20 Year 16			Transporter 2 Printed/Typed Name Signature Month 1 Day Year			
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____						
	Facility's Phone: _____						
	18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. NONE		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name			Signature			Month Day Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NYN 000 206 699	2. Page 1 of 1	3. Emergency Response Phone (908) 420-1707	4. Manifest Tracking Number 016689019 JJK		
5. Generator's Name and Mailing Address US EPA REGION 2-NIAGARA FALLS B 2890 WOODBRIDGE AVENUE EDISON, NJ 08837 Generator's Phone: (908) 420-1707			Generator's Site Address (if different than mailing address) 9450 NIAGARA FALLS BLVD NIAGARA FALLS, NY 14304				
6. Transporter 1 Company Name US Bulk Transport Inc.			U.S. EPA ID Number PAD 987347515				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. SITE #2 LANDFI 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		Non DOT Regulated Material	No.	Type			
			01	DT	Est 22	T	NORM
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information L163014WDI / Non RCRA-Non DOT Regulated Material (Debris)- Approved for the Office Area Area 5 medium concentration pile							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name CARL PELLEGRINO		Signature 		Month Day Year 12/20/16			
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
TRANSPORTER	Transporter 1 Printed/Typed Name John Davenport		Signature 		Month Day Year 12/20/16		
	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number: _____						
	Facility's Phone: _____						
	18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. NONE		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NYN 000 206 699	2. Page 1 of 1	3. Emergency Response Phone (908) 420-1707	4. Manifest Tracking Number 016689020 JJK	
5. Generator's Name and Mailing Address US EPA REGION 2-NIAGARA FALLS 2890 WOODBRIDGE AVENUE EDISON, NJ 08837			Generator's Site Address (if different than mailing address) 9450 NIAGARA FALLS BLVD NIAGARA FALLS, NY 14304			
Generator's Phone: (908) 420-1707						
6. Transporter 1 Company Name US Bulk Transport Inc.			U.S. EPA ID Number PAD 987 347515			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. SITE #2 LANDFI 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633			
Facility's Phone: (800) 592-5489						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	Non DOT Regulated Material	01 DT		EST 22	T	NORM
2.						
3.						
4.						
14. Special Handling Instructions and Additional Information L163014WDI / Non RCRA-Non DOT Regulated Material (Debris)- Approved for the Office Area Area 5 medium concentration pile TRUCK 317						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name CHARL FALGOUT		Signature <i>[Signature]</i>		Month Day Year 12 20 16		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name LARRY L BLOOD		Signature <i>[Signature]</i>		Month Day Year 12 20 16		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. NONE		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NYN 000 206 699	2. Page 1 of 1	3. Emergency Response Phone (908) 420-1707	4. Manifest Tracking Number 016689021 JJK		
5. Generator's Name and Mailing Address US EPA REGION 2-NIAGARA FALLS 2890 WOODBRIDGE AVENUE EDISON, NJ 08837			5. Generator's Site Address (if different than mailing address) 9450 NIAGARA FALLS BLVD NIAGARA FALLS, NY 14304				
Generator's Phone: (908) 420-1707							
6. Transporter 1 Company Name US Bulk Transport Inc.			U.S. EPA ID Number PAD987347515				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. SITE #2 LANDFI 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633				
Facility's Phone: (800) 592-5489							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
		Non DOT Regulated Material	01	DT	Est 23	T	NORM
		2.					
		3.					
		4.					
14. Special Handling Instructions and Additional Information 1. L163014WDI / Non RCRA-Non DOT Regulated Material (Debris)- Approved for the Office Area Area 5 medium concentration pile							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name CARL R. PELLEGRINO		Signature 		Month Day Year 12 20 16			
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
TRANSPORTER	Transporter 1 Printed/Typed Name FRANK ZALLO		Signature 		Month Day Year 12 20 16		
	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number:						
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number		
	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator)				Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. NONE		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NYN 000 206 699		2. Page 1 of 1 1		3. Emergency Response Phone (908) 420-1707		4. Manifest Tracking Number 016689022 JJK		
		5. Generator's Name and Mailing Address US EPA REGION 2-NIAGARA FALLS B 2890 WOODBRIDGE AVENUE EDISON, NJ 08837 Generator's Phone: (908) 420-1707		5. Generator's Site Address (if different than mailing address) 9450 NIAGARA FALLS BLVD NIAGARA FALLS, NY 14304						
6. Transporter 1 Company Name US Bulk Transport Inc.		U.S. EPA ID Number PAD981347515						7. Transporter 2 Company Name		
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. SITE #2 LANDFI 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 633								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) Non DOT Regulated Material				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
						01 DT		Est. 22	T	NORM
	2.									
	3.									
	4.									
14. Special Handling Instructions and Additional Information 1. L163014WDI / Non RCRA-Non DOT Regulated Material (Debris)- Approved for the Office Area Area 5 medium concentration pile										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name CARL R. PELLEGRINO										
Signature <i>[Signature]</i>										
Month Day Year 12 20 16										
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____										
17. Transporter Acknowledgment of Receipt of Materials										
Transporter 1 Printed/Typed Name MARK STRONG										
Signature <i>[Signature]</i>										
Month Day Year 12 20 16										
Transporter 2 Printed/Typed Name										
Signature										
Month Day Year										
18. Discrepancy										
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
Manifest Reference Number:										
18b. Alternate Facility (or Generator) U.S. EPA ID Number										
Facility's Phone:										
18c. Signature of Alternate Facility (or Generator)										
Month Day Year										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. NONE 2. 3. 4.										
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name										
Signature										
Month Day Year										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number NYN 000 206 699	2. Page 1 of 1	3. Emergency Response Phone (908) 420-1707	4. Manifest Tracking Number 016689023 JJK	
5. Generator's Name and Mailing Address 2890 WOODBRIDGE AVENUE EDISON, NJ 08837			5. Generator's Site Address (if different than mailing address) 9450 NIAGARA FALLS BLVD NIAGARA FALLS, NY 14304			
6. Transporter 1 Company Name US Bulk Transport Inc.			U.S. EPA ID Number PAD 987347515			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. SITE #2 LANDFI 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633			
Facility's Phone: (800) 592-5489						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	Non DOT Regulated Material	No.	Type			
		01	DT	Est 22	T	NORM
2.						
3.						
4.						
14. Special Handling Instructions and Additional Information 1. L183014WDI / Non RCRA-Non DOT Regulated Material (Debris)- Approved for the Office Area Area 5 medium concentration pile						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name CARLE PELLEGRINO		Signature 		Month Day Year 12 20 16		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Randy Akin		Signature 		Month Day Year 12 20 16		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number: _____						
18b. Alternate Facility (or Generator) U.S. EPA ID Number: _____						
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. NONE		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		